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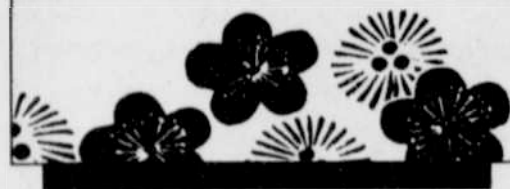
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The third stage of the AIDS epidemic

As AIDS makes inroads in rural America, gays gear up to battle ignorance and fear. Russo reports on the Douglas County AIDS Task Force.

B Y B I L L Y R U S S O

“From our perspective,” says long-time Roseburg activist Wes Luttrell, “this is the third stage of the AIDS epidemic.” The first stage



The Roseburg Report

took New York, Miami, San Francisco and Los Angeles by surprise. Many hundreds died during those first years without ever understanding why: nobody understood. The second stage of the epidemic saw the virus spreading to places like Hoboken, Boise, Houston and Portland before information about its transmission was

known. The gay community quickly mobilized in the epidemic's wake. The third stage is just starting. And it is affecting rural communities like Roseburg, Coos Bay, La Grande and Burns. And in Roseburg the larger community is playing an active role in fighting the spread of AIDS.

That the AIDS epidemic has reached the countryside is no surprise to anyone. What was — at first — surprising, is how well educated the larger community has become during the past few years. And when a handful of people started talking about forming a task force in Roseburg, it — like most of our community projects — sprang into existence overnight.

Our task force formed last October to address the issue of primary care of persons with AIDS. At that time there were no knowledgeable doctors or dentists accessible to persons at risk for AIDS. Through the efforts of task force members, two dentists agreed to serve as referrals for persons with AIDS as long as their names are not made public. Identifying a physician who will also serve as a referral has not been so fruitful. Ironically, physicians in this rural community seem to be the least informed — or the *most* resistant to being informed — about the epidemic. None of them want to be identified as the local “AIDS doctor.” They fear guilt by association. And therefore, they remain aloof.

AIDS was first addressed here by the Douglas County Health Department in May, 1983. The county epidemiologist organized this first interfacing, billed as an “AIDS Symposium,” with local gays shortly after the antibody test

became available. It was an informative evening, but more important a long lasting rapport developed between the gay community and the department.

It was also the county that sponsored a day-long AIDS seminar at the fairgrounds last January. It was here that police, paramedics, food service workers, administrators, etc. were introduced to AIDS. The seminar provided a wealth of information about what was known at that time. Soon local hospitals were offering in-services for their personnel. And all along — in my opinion — the local media reported on the epidemic responsibly.

This spring our task force is organizing another, similar seminar. Besides the county, the hospitals and community college will be asked to play a role. We are focusing on the importance of education.

Another issue important to our group is emergency care. Presently, medication for PCP (Pneumocystis Carinii Pneumonia), runs between \$380 and \$540 a week. This does not include doctor and hospital costs. The Gay And Lesbian Alliance (GALA) has a small fund to help individuals with medicine and other immediate needs; however, resources are limited. Other task force members are working with us to help meet this inevitable need.

All three Roseburg hospitals, the Douglas County Health Department and County Mental Health send representatives to the monthly task force meetings. The assistant pastor of the Roman Catholic Church, the health writer of the daily newspaper, the station manager of a rock station, a local attorney and two therapists in private practice are also part of the task force. They come together monthly with four GALA members to discuss problems and projects. One member has AIDS.

The task force is organized informally. It is a process for addressing AIDS-related issues in Douglas County. And it will provide the groundwork for future AIDS projects. •

CONDOMS FOR ORAL SEX?

Why not?

Condoms are an effective barrier.

Researchers at University of California-San Francisco recently proved in laboratory tests that commercially available condoms can stop the AIDS virus. The virus cannot penetrate the condom material of either latex or natural skin condoms.

Condoms are absolutely essential for anal sex.

Anal sex without a condom is, of course, incredibly foolish at this point in the AIDS epidemic. Statistical analysis of those who have become infected with the AIDS virus shows that unprotected anal sex is the chief cause of AIDS transmission among gay and bisexual men in America.

Condoms are also effective for oral sex.

Thanks to modern technology, condoms are now extremely thin (a fraction of the thickness of a human foreskin!) and can be very sensuous. With oral sex, condom breakage is extremely rare. Some brands of condoms have a neutral or pleasant taste. (Some are awful, however, so try different brands!)

UNSAFE SEX PRACTICES

- Anal Intercourse Without Condom
- Rimming
- Fisting
- Blood Contact
- Sharing Sex Toys or Needles
- Semen or Urine in Mouth
- Vaginal Intercourse Without Condom

Semen can carry large quantities of the virus.

Semen is a body fluid that is known to be capable of transmitting large quantities of the AIDS virus. Oral sex to climax—getting semen in your mouth or in the mouth of your partner—is obviously Unsafe.

Preseminal fluid (“pre-cum”) may also carry the virus. With preseminal fluid, safety could also depend on the quantity of fluid you are exposed to. Some men produce a lot of preseminal fluid, some don't. Why take a chance? Unprotected oral sex—stopping before climax—is only “possibly safe.” By adding a condom, you are adding significant protection.

Condoms eliminate the worry.

For oral sex, a condom reduces both the risk and the worry. Condoms allow you to experiment, have sex longer, and safely enjoy the encounter with your partner. Sex without worry is obviously far more enjoyable for both partners.

You can easily learn to use condoms for oral sex.

Be creative; try different brands. Lubricated condoms are best for anal intercourse, but many people prefer unlubricated condoms for oral sex. If you add a lubricant, make sure it's water-based. Condoms are inexpensive and readily available. Experiment!

Unsafe Sex is now definitely obsolete.

Male-to-male sexual survival in the '80s calls for adaptability and creativity. Gay and bisexual men are certainly capable of both. *Let's completely end Unsafe Sex until this epidemic is over. Most of us already have—let's make it unanimous in '87.*



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